

After exhaustive studies, analysis and discussion of this issue, the time to pass this measure is now. In the name of equitable access to this resource, I urge the passage of this bill.

RECOGNIZING THE FAIRFAX COUNTY CHAMBER OF COMMERCE 2003 VALOR AWARD RECIPIENTS

HON. TOM DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 11, 2003

Mr. TOM DAVIS of Virginia. Mr. Speaker, I rise today to recognize an extraordinary group of men and women in Northern Virginia. Each year, the Fairfax County Chamber of Commerce, along with the Fairfax County Board of Supervisors, recognizes public safety officials who have courageously demonstrated selfless dedication to public safety. These individuals are honored with the highest honor that Fairfax County bestows upon its public safety officials—The Valor Award.

There are several Valor Awards that a public safety officer can be given: The Lifesaving Award, a Certificate of Valor, or a Gold, Silver, or Bronze Medal of Valor. During the 25th Annual Awards Ceremony, 88 men and women from the Office of the Sheriff, Fire and Rescue Department, and Police Department received one of the aforementioned honors for their bravery and heroism.

It is with great honor that I enter into the RECORD the names of the recipients of the 2003 Valor Award in the Fairfax County Fire and Rescue Department. Receiving the Lifesaving Award: Captain John Hart, Shift Supervisor Roy B. Shrout III, Asst. Shift Supervisor Tammy Read, Psc.III Judith Lassiter, Psc.III Susan Farria, Psc.III Alicia Dale, Lieutenant Joseph Palau, Firefighter Juan C. Ayala, Technician Gregory W. Hunter, Technician David H. Gilmore, Technician Bryan J. Nix, and Technician James H. Williams; Certificate of Valor: Senior Building Inspector Michael A. Andreano, and Firefighter James M. Furman; Silver Medal of Valor: Lieutenant Wayne B. Stottlemeyer, and Technician Ronald S. Pifer; Bronze Medal of Valor: Master Technician John C. Mayers.

Mr. Speaker, in closing, I would like to take this opportunity to thank all the men and women who serve the Fairfax County Fire and Rescue Department. The events of September 11th served as a reminder of the sacrifices our emergency service workers make for us every day. Their constant efforts on behalf of Fairfax County citizens are paramount to preserving security, law and order throughout our neighborhoods, and their individual and collective acts of heroism deserve our highest praise. I ask that my colleagues join me in congratulating this group of extraordinary citizens.

INTRODUCTION OF THE MEDICARE Rx DRUG BENEFIT AND DISCOUNT ACT

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, March 11, 2003

Mr. RANGEL. Mr. Speaker, today, I am proud to introduce the Medicare Rx Drug Benefit and Discount Act with JOHN DINGELL, the Dean of the House and Ranking Member of the Energy and Commerce Committee. Our Ranking Member on the Ways and Means Health Subcommittee, PETE STARK, has had a leadership role in the development of this legislation, as have so many other health care leaders in our caucus.

This legislation makes good on our promise to add affordable, comprehensive prescription drug coverage to Medicare.

The Democratic bill will look, smell, taste, and feel like any other Medicare benefit, because it is a Medicare benefit. Beneficiaries will not be forced to join an HMO or other private insurer to get the prescription drugs they need.

Under this legislation, every beneficiary will be guaranteed a \$25 monthly premium, \$100 annual deductible, 20 percent coinsurance and \$2000 out-of-pocket limit, no matter where they live.

We provide additional assistance for low-income beneficiaries. Those with incomes up to 150 percent of the poverty level (\$13,470 for one person) will pay nothing.

Those with incomes between 150–175 percent of poverty (\$13,470–\$15,715 for a single person) will pay premiums on a sliding scale with no additional cost-sharing.

The Medicare Rx Drug Benefit and Discount Act would: lower prescription drug costs for all Americans, regardless of whether they are covered by Medicare, give all Medicare beneficiaries the option of a reasonably-priced guaranteed prescription benefit under Medicare, and ensure that senior citizens and people with disabilities receive coverage for the drug their doctor prescribes and not some substitute that an insurance company deems “equivalent.”

Unlike the President's and other Republicans' proposal, our plan would never force seniors into an HMO or similar private plan in order to get a prescription drug benefit.

Republicans claim they will give seniors a “Medicare” prescription drug benefit, but their proposals are really just a way to provide subsidies to insurance plans and HMOs, not to help beneficiaries.

Republicans claim they will give beneficiaries choices, but their proposals really leave virtually all of the important decisions to the private insurance companies. Under the GOP plan, private insurers will decide which drugs are covered and which are not. If your drug is not on the list, too bad. Millions of seniors will not be able to afford their prescriptions under the GOP plan. Under the GOP plan, private insurers can pick and choose which pharmacies to include in their networks. If your neighborhood pharmacy is not on the preferred list, you are out of luck.

The bottom line is that those who can buy insurance under the GOP plan may find their choice of pharmacies severely limited or that they cannot get coverage for the drugs prescribed by their doctor.

Ultimately, there is only one choice the President and other Republicans want to force seniors to make—the choice of either their family doctor or their life-saving medicines. Under the GOP plan, seniors in search of even modest drug benefits would have to leave the traditional Medicare program—where they have the choice of any doctor they want—and join an HMO or other private insurer that may or may not cover their family doctor.

Many HMOs and private insurers have unfairly limited health care in the past. That's what the Patients' Bill of Rights debate has been about. They've been unreliable partners in Medicare to date; just look at the problems in the Medicare+Choice program. And now the Republicans want to put them in charge of this medication benefit under their “privatization” model.

Republican leaders have never liked Medicare. Former Speaker Gingrich once said Medicare would “wither on the vine because we think people are voluntarily going to leave it.” In 1995, Dick Armev called Medicare: “a program I would have no part of in a free world.”

Republican proposals lay the groundwork for them to make good on their desire to do away with the program. The Republican prescription drug plan is the first step towards privatizing Medicare. They would force seniors to deal with private insurance companies instead of having the choice of getting prescriptions through Medicare. They would also institute so-called “modernizations” that would significantly raise the premiums of beneficiaries who wish to stay in the traditional Medicare program.

In contrast, we base our plan—not on a flawed privatization model—but on the successful Medicare program. We offer a genuine Medicare plan, providing affordable voluntary drug coverage to all American seniors through Medicare.

Under this legislation, no senior will ever have to choose between putting food on the table or paying the rent or getting the medicines they need.

This legislation also helps reduce the skyrocketing costs that seniors and other beneficiaries currently pay for prescription drugs by utilizing the collective negotiating power of Medicare's 40 million beneficiaries to guarantee lower drug prices. By closing some loopholes in current law that prevent or delay generic drugs from coming to market, this legislation also reduces drug prices for all Americans.

While our Republican colleagues are engaged in a cynical political exercise designed to bring themselves political cover, we offer serious legislation. It would bring senior citizens Medicare prescription drug coverage.

When President Harry Truman first proposed Medicare in his second term, a wide array of Republican forces were against him saying he could not do it. Truman said: “We may not make it [now], but someday we will.” Eventually, Truman and other Medicare advocates succeeded. Harry and Bess Truman became the first Medicare enrollees in 1965.

The Republican leadership may prevent us from passing a true Medicare prescription drug benefit now, but they cannot stop us in the long run because that is what seniors and all Americans have said they really want.

As PETE STARK points out, prescription drug coverage is as essential to seniors' good